

*Payment received
10-8-80
Roadway Express, Inc.
check # 900-084304
\$ 107.79*

September 25, 1980

Mr. Ben Via
Roadway Express, Inc.
Route #2, Box 121
Strafford, Missouri

Dear Mr. Via:

On September 10, 1980, personnel for the City of Springfield, Public Works Department, responded to a spill of diesel fuel within the corporate limits of this City. The spill was due to an accident involving a tractor-trailer operated by your firm.

The ordinances of the City provide for recovery of the costs involved in the abatement of a violation under emergency conditions. Payment of those costs should be made to the Director of Finance, City of Springfield, Missouri, and sent to:

City Hall
830 Boonville, Room 210
Springfield, Missouri 65802
Attention: Robert R. Schaefer, P.E.

Please find attached a detailed explanation of the costs involved. If you have any questions, please feel free to call 864-1924.

Yours truly,

Robert E. Corson
Water Pollution Control Inspector III
Surveillance & Enforcement

REC:js

cc: Mr. Robert R. Schaefer, P.E., Superintendent of Sanitary Services
cc: Director of Finance, City of Springfield
cc: Mr. John Nixon, P.E., Regional Administrator
cc: Department of Natural Resources

Attachment

400 E. OLIVE

PERSONNEL COSTS

	<u>Rate</u>	<u>Hours</u>	<u>Costs</u>
R. Corson	13.37	2	26.74
R. Lyman	13.37	2	26.74
S. Short	11.08	2	22.16
J. Allen	9.14	1	9.14
R. Young	9.14	1	9.14
E. Carter	8.28	1.5	12.42
		TOTAL	\$106.34

EQUIPMENT COSTS

P1-28	.50/mi.	5 mi.	2.50
T2-47	.60/mi.	5 mi.	3.00
T2-37	.50/mi.	5 mi.	2.50
T3-8	.65/mi.	5 mi.	3.25
2 sweepers	18.00/hr.	1/2 each	18.00
NP-59	18.75/hr.	1 hr.	18.75
NP-206	40.00/hr.	1 hr.	40.00
		TOTAL	\$88.00

MATERIALS

2 cubic yards sawdust	5.00
Absorbant pads .35/each x 21	7.35
TOTAL	\$12.35

Total cost of spill abatement - \$206.69 less 100 gallons of diesel fuel recovered by City at \$.989 per gallon to be deducted from abatement .

Cost per agreement - \$98.90.

Cost to be paid for spill abatement - \$107.79.

SENDER: Complete items 1, 2, and 3. Add your address in the "RETURN TO" reverse.

1. The following service is requested (check one):
☒ Show to whom and date delivered.
☐ Show to whom, date, and address of delivery.
☐ RESTRICTED DELIVERY
☐ RESTRICTED DELIVERY
☐ RESTRICTED DELIVERY
 Show to whom, date, and address of delivery \$
 (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
 Mr. Ben Via Rt. 2, Box 121
 Roadway Express, Inc. Strafford, MO

3. ARTICLE DESCRIPTION:
 REGISTERED NO. 9037025 CERTIFIED NO. INSURED NO.
 (Always obtain signature of addressee or agent)

I have received the article described above.
 SIGNATURE ☐ Addressee ☐ Authorized agent

4. DATE OF DELIVERY
 9-27-80

5. ADDRESS (Complete only if requested)
 Strafford, MO

6. UNABLE TO DELIVER BECAUSE:
 U.S. CLERK'S INITIALS

SEP 29 1980

☆GPO 1977-0-249-595

P04 9037025

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

SENT TO
 Mr. Ben Via, Roadway Exp.
 Street and NO.
 Route #2, Box 121
 P.O., STATE AND ZIP CODE
 Strafford, MO

POSTAGE \$

CERTIFIED FEE \$

SPECIAL DELIVERY \$

RESTRICTED DELIVERY \$

SHOW TO WHOM AND DATE DELIVERED \$

SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY \$

SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY \$

SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY \$

CONSULT POSTMASTER FOR FEES

OPTIONAL SERVICES

RETURN RECEIPT SERVICE

TOTAL POSTAGE AND FEES \$

POSTMARK OR DATE 08/52/80